# OLR Bill Analysis SB 956

AN ACT CONCERNING PEDIATRIC AUTOIMMUNE NEUROPSYCHIATRIC DISORDER ASSOCIATED WITH STREPTOCOCCAL INFECTIONS.

## **SUMMARY:**

This bill requires the Department of Public Health (DPH) to develop programs to educate the medical community and general public and promote research on pediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS).

The bill also requires certain health insurance policies to cover the diagnosis and treatment of PANDAS. It applies to individual and group policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including coverage under an HMO plan. Due to the federal Employee Retirement Income Security Act (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.

EFFECTIVE DATE: October 1, 2013 for the DPH requirement and January 1, 2014 for the insurance coverage requirement

#### **DPH PROGRAMS**

The bill requires DPH's PANDAS programs to include:

- 1. clinical awareness programs for physicians;
- 2. informational outreach programs for teachers and the general public;
- 3. epidemiological studies of PANDAS within Connecticut;
- 4. the establishment of a panel of PANDAS experts in the clinical

and research communities to help develop practice guidelines for the diagnosis, care, and treatment of PANDAS in the state; and

5. the establishment of a state liaison to develop science-based guidelines for the diagnosis, care, and treatment of PANDAS with the National Institute of Mental Health and the Centers for Disease Control and Prevention.

### **BACKGROUND**

### Related Federal Law

The Patient Protection and Affordable Care Act (P.L. 111-148) allows a state to require health plans sold through the state's health insurance exchange to offer benefits beyond those included in the required "essential health benefits," provided the state defrays the cost of those additional benefits. The requirement applies to benefit mandates enacted after December 31, 2011. Thus, the state is required to pay the insurance carrier or enrollee to defray the cost of any new benefits mandated after that date.

## **COMMITTEE ACTION**

Insurance and Real Estate Committee

Joint Favorable Yea 13 Nay 4 (03/07/2013)